

STATE OF MARYLAND
TANNING FACILITY COMPLAINT FORM

INSTRUCTIONS:

This form can be used to file a complaint regarding a potential violation of the law on tanning by minors (Md. Code Ann., Health-General § 20-106 and/or the regulations promulgated pursuant to the law, COMAR 10.52.06 Use of Tanning Devices by Minors. The law states that an owner, employee, or operator of a tanning facility may not allow a minor under the age of 18 years to use a tanning device unless the minor's parent or legal guardian provides written consent on the premises of the tanning facility and in the presence of an owner, employee, or operator of the tanning facility. The law also specifies that the owner, employee, or operator of a tanning facility shall require appropriate documentation to verify the age of an individual before allowing the individual access to a tanning device. The specific requirements in the regulations (COMAR 10.52.06) that must be followed by tanning facilities are:

- ✓ The tanning facility operator **must** ask for proof of age, as verified by a State or federal government-issued identification card.
- ✓ If the person getting the tan is a minor (less than 18 years old), the tanning salon operator must ask the parent or guardian for proof of identity, in the form of a government-issued identification card, AND get consent using a consent form approved by the Department of Health and Mental Hygiene.
- ✓ If the person getting the tan is a minor and a parent or guardian has previously provided consent, the facility operator must verify that the consent is still in effect and has not expired.
- ✓ The person-in-charge must keep records on each tanning session of the minor, and the total amount of time the minor has spent tanning, and provide this information to the parent or guardian upon request.

To file a complaint, print the form and complete it as accurately as possible. Describe what you observed in as much detail as you can. If the possible violation(s) you describe is not all in one area, identify the location of each possible violation individually. If you need more space than that provided on the form, continue on another sheet of paper.

After completing the form, mail, fax, or submit the form in person to the local health department in the county or jurisdiction where the business establishment is located. If you are uncertain about how or where to submit the application, or would like more information, call the **Infectious Disease and Environmental Health Help Line** at **1-866-703-3266**. You can also learn more by looking under Environmental Health on the Department's website, www.dhmh.state.md.us.

When the local health department receives your complaint, the possible violations you describe will be reviewed to determine whether an inspection is appropriate. ***If additional information is needed, the investigating agency will attempt to contact you by telephone. Please be sure your complete name and contact information, including address, are printed clearly and correctly.***

Thank you for your interest in protecting the health of Maryland's children.

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	Complaint Number (For Department Use Only)
Tanning Facility Name	
Tanning Facility Mailing Address	
Tanning Facility Location (if different from mailing address)	
Tanning Facility Telephone Number	
Person in Charge of the Establishment	
Date and time of possible violation	Date: _____ Time: _____ AM PM
What was the possible violation? Please describe each possible violation, including where it occurred. Refer to the description of requirements on the first page of this form, or contact our Help Line at 1-866-703-3266. Use additional pages if necessary to provide complete information.	
What was the complaint (check all that apply): <input type="checkbox"/> Minors are allowed to use a tanning device at this tanning facility without a signed consent form [Md. Code Ann., Health General ("Health-General" § 20-106(b); COMAR 10.52.06.04] or with a signed consent form that has expired [COMAR 10.52.06.06B]. <input type="checkbox"/> Consent forms are not signed by the parent or legal guardian [Health-General § 20-106(b); COMAR 10.52.06.05C] <input type="checkbox"/> Consent forms are not signed by the parent or legal guardian in the presence of the person-in-charge [Health-General § 20-106(b); COMAR 10.52.06.05D(1)] <input type="checkbox"/> Signed consent forms are not provided to the parent or legal guardian [COMAR 10.52.06.05 D(2)] <input type="checkbox"/> The person-in-charge does not verify the identity of the parent or legal guardian with a State or federal government-issued identification card [COMAR 10.52.06.05E] <input type="checkbox"/> The person-in-charge allows customers to use tanning devices at this facility without confirming that the customer is not a minor, using a State or federal government-issued identification card [Health-General § 20-106 (c); COMAR 10.52.06.06A] Detailed information about complaint: _____ _____ _____	
Please indicate whether you have reported this to	<input type="checkbox"/> Owner <input type="checkbox"/> Other Facility <input type="checkbox"/> Government agency (specify)
Complainant's name	
Telephone Number	
Address	
Date	
(OFFICIAL USE ONLY) Complaint No. _____ DHMH Control No. _____ Date and initial when each task is completed. <input type="checkbox"/> Complaint received by Department <input type="checkbox"/> Investigation or telephone follow-up <input type="checkbox"/> Findings/citation letter sent to owner <input type="checkbox"/> Correction verification received Other comments:	